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SCIENCE, PSYCHIATRY AND SOCIAL JUSTICE

Medication-free Ward in Tromsø, Norway May Soon Close

By **Robert Whitaker** - November 2, 2023

This past spring, the Hurdalsjøen Recovery Center in Norway, a private hospital that offered medication-free care to Norwegian psychiatric patients, had to close due to a governmental decision to stop public funding for private enterprises. Now, the medication free-ward in Åsgård Hospital in Tromsø is threatened with closure.

This 6-bed ward had been the most visible example—perhaps anywhere in the Western World today—of inpatient treatment for psychotic and bipolar patients that promoted tapering from psychiatric drugs, or, if the patients wanted, to be treated in the hospital without use of such medications. The University Hospital of Northern Norway (UNN) has proposed replacing the in-patient treatment with "consultants" that will support drug-free treatment at outpatient clinics throughout the region.

If the closure proceeds, it will be a second significant blow to a "medication-free" initiative that dates back more than a decade, when five user groups in Norway jointly began lobbying for such treatment in hospital settings. In 2016, the Norwegian Health Ministry ordered all four health districts in the country to set aside beds for such care.

The Tromsø ward opened in 2017, and over the six years, it has shown that offering patients the option to forgo psychiatric medication, or to taper from the drugs, can be a successful model of care.

The user groups, led by We Shall Overcome (WSO), have protested this proposed closure, with their latest letter dated October 29. They wrote:

> "The current drug-free treatment program at UNN is a flagship for drug-free treatment in Norway. It has attracted national and international attention, and there is great interest in visiting the ward to learn. Several users report good results, and are now expressing their support for the department to continue.
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> Many patients in the mental health service find that medication does not help their health condition, or experience significant side effects. It is therefore important to maintain services that can help this group, and to provide information about and offer drug-free treatment. Drug-free treatment is not currently offered in acute psychiatry, and many patients are put on medication during their first encounter with psychiatric services, under voluntary or coercive measures, and are often given large amounts of medication. It can then be difficult to stop the medication or taper, without a long-term and responsible tapering plan. By offering drug-free services, including in acute psychiatry, it is possible to prevent unnecessary use of drugs, unnecessary tapering processes and unfortunate long-term consequences of drug use."

And:

> "The drug-free program at UNN has been in operation for almost seven years. During this period, the service has built up a large competence base in drug-free services and special expertise in the responsible tapering of psychotropic drugs. The inpatient unit is a unique research arena and maintaining such an inpatient unit is important for further knowledge development in the area. Any establishment of a drug-free consultation team requires that the team is supported by a skilled competent environment, and should be anchored in such a drug-free inpatient unit.
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> The proposal to convert the drug-free inpatient services into a consultation team is not justified by deficiencies in the service or lack of demand, but because the aim is to free up resources for other drug-

> controlled services. The proposal appears to be poorly thought out in relation to the national guidelines for drug-free treatment services. WSO believes that the proposal will in practice lead to the closure of drug-free services at UNN, which will have major negative consequences for users. At the same time, it is likely that the professional community at the drug-free inpatient unit will cease and the knowledge gained will be lost if it is converted to a consultation team."

From the outset of this initiative, the Norwegian Psychiatric Association has mostly opposed it, with prominent psychiatrists arguing that antipsychotics were an essential treatment for psychotic patients. However, as WSO wrote in their letter, the initiative in Tromsø has attracted international interest as an example of a recovery-oriented initiative that gives patients the right to choose whether they want to take antipsychotics and other psychiatric drugs, and it has shown that this approach can be helpful to patients.

Rather than close the inpatient ward and switch to providing "medication-free" treatment in the community, WSO is urging the University Hospital to do both. It writes:

> "In summary, WSO requests the following: In the future structure for PHRK at UNN, the drug-free inpatient service will be retained as a separate unit as it is today. At the same time, the drug-free service will be strengthened with a consultation team that encompasses the entire region and all units."

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Robert Whitaker

Robert Whitaker is a journalist and author of two books about the history of psychiatry, *Mad in America* and *Anatomy of an Epidemic*, and the co-author, with Lisa Cosgrove, of *Psychiatry Under the Influence*. He is the founder of madinamerica.com.